

REQUEST FOR PERSONNEL ACTION						DATE PREPARED				
1. SERIAL NUMBER		2. NAME (Last-First-Middle) <div style="text-align: center;">ADAMSKI, Walter NMI</div>								
3. NATURE OF PERSONNEL ACTION <div style="text-align: center;">Excepted appointment</div>				4. EFFECTIVE DATE REQUESTED <div style="display: flex; justify-content: space-between;"><div>MONTH</div><div>DAY</div><div>YEAR</div></div>		5. CATEGORY OF EMPLOYMENT <div style="text-align: center;">Regular</div>				
6. FUNDS		7. COST CENTER NO. CHARGE-ABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)						
9. ORGANIZATIONAL DESIGNATIONS <div style="text-align: center;">DD/S&amp;T O/DD/S&amp;T Unassigned</div>				10. LOCATION OF OFFICIAL STATION <div style="text-align: center;">Washington, D. C.</div>						
11. POSITION TITLE <div style="text-align: center;">IO-Physical Scien</div>				12. POSITION NUMBER <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>		13. CAREER SERVICE DESIGNATION <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>				
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) <div style="text-align: center;">GS</div>		15. OCCUPATIONAL SERIES <div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div>		16. GRADE AND STEP <div style="text-align: center;">*</div>		17. SALARY OR RATE <div style="text-align: center;">\$ *</div>				
18. REMARKS <div style="padding: 10px;">Subject will require an SI clearance. Subject to satisfactory completion of one-year trial period.  Grade and salary to be determined.  REQUEST 60-day EXPEDITE SECURITY CLEARANCE.</div>										
19. DATE SIGNED		19 Oct 65		188. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 19 Oct 65				
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING <div style="display: flex; justify-content: space-between;"><div>NUMERIC</div><div>ALPHABETIC</div></div>		22. STATION CODE	23. CODE	24. HDQTRS. CODE	25. DATE OF BIRTH <div style="display: flex; justify-content: space-between;"><div>MO.</div><div>DA.</div><div>YR.</div></div>	26. DATE OF GRADE <div style="display: flex; justify-content: space-between;"><div>MO.</div><div>DA.</div><div>YR.</div></div>	27. DATE OF LEI <div style="display: flex; justify-content: space-between;"><div>MO.</div><div>DA.</div><div>YR.</div></div>	
28. NTE EXPIRES <div style="display: flex; justify-content: space-between;"><div>MO.</div><div>DA.</div><div>YR.</div></div>		29. SPECIAL REFERENCE	30. RETIREMENT DATA <div style="display: flex; justify-content: space-between;"><div>1-CSC 3-FICA 5-NONE</div><div>CODE</div></div>		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA <div style="display: flex; justify-content: space-between;"><div>TYPE</div><div>MO.</div><div>DA.</div><div>YR.</div></div>		33. SECURITY REQ. NO.	34. SEX	
35. VET. PREFERENCE <div style="display: flex; justify-content: space-between;"><div>CODE</div><div>0-NONE 1-5 PT. 2-10 PT.</div></div>		36. SERV. COMP. DATE <div style="display: flex; justify-content: space-between;"><div>MO.</div><div>DA.</div><div>YR.</div></div>		37. LONG. COMP. DATE <div style="display: flex; justify-content: space-between;"><div>MO.</div><div>DA.</div><div>YR.</div></div>		38. CAREER CATEGORY <div style="display: flex; justify-content: space-between;"><div>CAR/RESV PROV/TEMP</div><div>CODE</div></div>		39. FEGLI/HEALTH INSURANCE <div style="display: flex; justify-content: space-between;"><div>CODE</div><div>0-WAIVER 1-YES</div><div>HEALTH INS. CODE</div></div>		40. SOCIAL SECURITY NO.
41. PREVIOUS GOVERNMENT SERVICE DATA <div style="display: flex; justify-content: space-between;"><div>CODE</div><div>0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)</div></div>				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA <div style="display: flex; justify-content: space-between;"><div>FORM EXECUTED 1-YES 2-NO</div><div>CODE</div><div>NO. TAX EXEMPTIONS</div></div>		44. STATE TAX DATA <div style="display: flex; justify-content: space-between;"><div>FORM EXECUTED 1-YES 2-NO</div><div>CODE</div><div>NO. TAX EXEMP.</div><div>STATE CODE</div></div>		
45. POSITION CONTROL CERTIFICATION						46. O.P. APPROVAL		DATE APPROVED		

~~SECRET~~  
(When Filled In)

**EMPLOYEE NOTICE OF RESIGNATION**

I RESIGN EFFECTIVE \_\_\_\_\_ FOR THE FOLLOWING REASON:  
(Date)

MY LAST WORKING DAY WILL BE—

DATE SIGNED

SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

**INSTRUCTIONS**

Items 1 thru 7 and Items 9 thru 18a — The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 — "Category of Employment" should show one of the following entries:

Regular	Summer	WAE
Part Time	Detail Out	Consultant
Temporary	Detail In	Military
Temporary-Part Time		

Item 9 — "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:

FIRST LINE  
Major Component (Director, Deputy Director, etc.)  
Office, Major Staff, etc.  
Foreign Field or U.S. Field (if pertinent)  
Division or Staff (subordinate to first line)  
Branch  
Section  
Unit

Items 11 and 15 — "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18—Remarks.

Item 18b — Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, *the gaining Career Service should approve* and the other Career Service should concur in Item 18, Remarks.

**ROUTING—** The original only of this form will be forwarded to the Office of Personnel *through* the appropriate Career Service official(s). In the case of requests specified in \_\_\_\_\_, which require advance approval of or notification to the Office of Security or the Office of the Comptroller, one copy only will be sent to the Office(s) concerned.

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